



WATER USE VARIANCE APPLICATION

Applicant(s) Address: _____

Applicant (s) Name: _____ Phone: _____

What is the purpose of the water use?

From what Specific Provision(s) of the Drought Contingency Plan are you requesting relief?

- ☐ Days of watering? ☐ Hours of watering? ☐ Dust Control during Construction?
☐ Washing of vehicles? ☐ Use of a fire hydrant? ☐ Water for a fountain / pond?
☐ Golf course irrigation? ☐ Water for swimming, wading or spa pools?
☐ Serving unrequested water in restaurants? ☐ Other _____

How will the selected Provision(s) above adversely affect you?

Describe the specific relief you are requesting?

How long do you want the variance? No. of Days? _____ (30 days maximum)

Starting Date: _____ Ending Date: _____

What alternative ways do you propose to take that will meet the requirements of the Plan?

What other pertinent information can you add to justify the issuance of this variance?

Signature: _____ Date: _____

City Use: Variance approved? Yes ____ No ____

Reason: _____

By: _____ Date: _____